

Kalamazoo Area Transportation Study Time Activity and Cost Report

Name Month Year

Agency Rate

Does not include fringe.

Date	200 Hours	300 Hours	500 Hours	Activity Description

	200	300	500	Total
Total Hours				
Total Cost				

Employee Signature Date

Supervisor Signature Date

Work Codes
 200 Short Range Planning
 300 Data and Performance Management Measures
 500 Long Range Planning

KATS USE
 Entered:
 Received: